

CERTIFICATE OF ASSUMED BUSINESS NAME

IE aned

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

OB JAN 28 AM 10: 12
SECRETARY OF STATE
STATE OF IDAHO

Steve's Transmi	ssions
The true name(s) and business address(es) of the business under the assumed business name:	
Name	Complete Address
Rhonda M. Nelson	POB 876, Ponderay, ID 83852
The general type of business transacted under the	ne assumed business name is:
Retail Trade Transportation and	Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Cubmit Codificate of
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
	Name and \$25.00 fee to:
☐ Finance, Insurance, and Real Estate	
The name and address to which future	Idaho Secretary of State 450 N 4th Street
correspondence should be addressed:	PO Box 83720
Rhonda M. Nelson	Boise ID 83720-0080
POB 876	(208) 334-2301
Ponderay, ID 83852	
Niero and address facility astrony to t	
 Name and address for this acknowledgment copy is (if other than # 4 above); 	
see above	
	Secretary of State use only
ature: And Add The second	
ed Name: Rhonda M. Nelson	
ature: Solo Proprietor Solo Proprietor	
acity/Title: Sole Proprietor	CK: 5420 CT: 221922 BH: 1
(see instruction # 8 on back of form)	1 # 25.00 = 25.00 ASSUM

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